



Patent  
Attorney's Docket No. 032326-073

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of  
Pascal COOREMAN et al  
Application No.: 09/601,111  
Filed: July 27, 2000

For: MICROPROCESSOR CARD  
INCLUDING A CABLE  
COMMUNICATION CIRCUIT

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)  
) Group Art Unit: 2876

)  
) Examiner: Unassigned  
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**REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Enclosed is a copy of the Official Filing Receipt marked in red to show correction that is needed. The correction is as follows.

Correct the title to read: **Microprocessor Card Including a Cable Communication**


**Circuit.**

Issuance of a corrected Official Filing Receipt is respectfully requested.

- ☒ This Request for Corrected Official Filing Receipt is being filed to correct a Patent Office error. No fee is required.
- ☐ The \$25.00 (576) fee required under 37 C.F.R. § 1.19(h) to correct an Official Filing Receipt due to applicant error: ☐ is enclosed; ☐ is authorized to be charged to Deposit Account No. 02-4800 and this paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

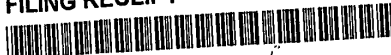
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Date: September 6, 2000

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## FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/601,111	07/27/2000	2876	840	032326-073	-	4	1

21839

BURNS DOANE SWECKER & MATHIS L L P  
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Date Mailed: 08/22/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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BERTRAND GOMEZ, ROQUEVAIRE, FRANCE;

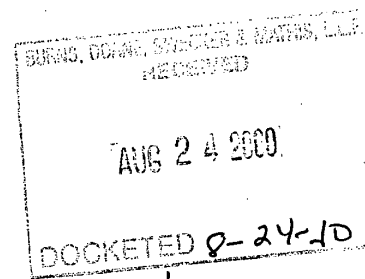
## Continuing Data as Claimed by Applicant

THIS APPLICATION IS A 371 OF PCT/FR99/00054 01/14/1999

## Foreign Applications

FRANCE 98/00858 01/27/1998

If Required, Foreign Filing License Granted 08/22/2000

Gemplus  
032326-073  
JAL.

## Title

MICROPORCESSOR CARD COMPRISING A WIRED COMMUNICATION CIRCUIT

Including a Cable Communication Circuit

## Preliminary Class

235

Data entry by : ORDENEZ, MARTA

Team : OIPE

Date: 08/22/2000

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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/601,111	<b>FILING DATE</b> 07/27/2000 <b>RULE</b> -	<b>CLASS</b> 235	<b>GROUP ART UNIT</b> 2876	<b>ATTORNEY DOCKET NO.</b> 032326-073
<b>APPLICANTS</b> STEFAN RAYON, CIOTAT, FRANCE; PASCAL COOREMAN, CIOTAT, FRANCE; BERTRAND GOMEZ, ROQUEVAIRE, FRANCE;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/FR99/00054 01/14/1999				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 98/00858 01/27/1998				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 08/22/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> -	<b>TOTAL CLAIMS</b> 4
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b>				
21839				
<b>TITLE</b>				
MICROPORCESSOR CARD INCLUDING A CABLE COMMUNICATION CIRCUIT				
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	